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BIB DATA SHEET

CONFIRMATION NO. 1020

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/699,175	10/31/2003	623	3738	MSDI-434/PC316.08

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** CONTINUING DATA *****

This application is a CON of 10/035,074 12/28/2001 PAT 6,695,882
 which is a CON of 09/453,787 12/03/1999 PAT 6,409,765
 which is a CON of 08/867,963 06/03/1997 PAT 6,033,438

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

01/05/2004

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No					
Verified and Acknowledged	/SUZETTE JAMIE J GHERBI/ Examiner's Signature	Initials	FL	21	62	3

ADDRESS

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TITLE

Open intervertebral spacer

FILING FEE RECEIVED 8426	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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